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SERIAL NUMBER 09/718,224	FILING OR 371(c) DATE 11/21/2000 RULE	CLASS 709	GROUP ART UNIT 2153	ATTORNEY DOCKET NO. 10.0795
APPLICANTS Darryl Black, Hollis, NH; Anne K. Winiewicz, Lexington, MA;				
** CONTINUING DATA ***** This application is a CIP of 09/711,054 11/09/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 02/21/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____	STATE OR COUNTRY NH	SHEETS DRAWING 215	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 6
ADDRESS 22474				
TITLE INTERNAL NETWORK DEVICE DYNAMIC HEALTH MONITORING				
FILING FEE RECEIVED 618	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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